SPECIAL SUPPLEMENTAL NUTRITION PROGRAM FOR WOMEN, INFANTS AND CHILDREN (WIC)

HISTORY OF WIC 1974-1999 25TH ANNIVERSARY

ACTIVITIES WHICH LED TO WIC'S ESTABLISHMENT

PROLOGUE: THE BEGINNING OF USDA'S FOOD ASSISTANCE PROGRAMS

- 1934 After the Nation collapsed into deep depression--a time when farmers were burdened with food they could not sell, while thousands stood in bread lines waiting for something to eat--President Roosevelt formed the Federal Surplus Relief Corporation to distribute surplus commodities to the destitute millions.
- 1935 The first major legislative initiative pertaining to commodity distribution was the Agriculture Act of 1935 (signed on August 24, 1935). The purpose of the Commodity Distribution Program was to boost farm prices either by encouraging exports, or by buying overproduced (surplus) foods (vegetables and fruits) for domestic consumption. The funding source for these purchases (Section 32) gave USDA 30 percent of all custom receipts on products imported to the United States. (The Commodity Distribution Program remained the major form of food assistance for low-income households until nationwide expansion of the Food Stamp Program during the early 1970s. By the end of Fiscal Year 1975, the Commodity Distribution Program was limited to Indian reservations which preferred food distribution to food stamps.)
- **1939** 13 million Americans were eating surplus foods. Recipient categories for the foods were schools, summer camps for children, charitable institutions and needy families.
- 1939-1943 a prototype of today's Food Stamp Program was initiated called the Food Stamp Plan. Families were required to pay to the government an amount equivalent to their normal expenditures for food. In exchange, they received this value in stamps plus bonus stamps to buy designated surplus commodity foods at retail establishments. By 1941 a million families participated, however the program never operated nationwide. A flaw of this program was that the very poor who needed it the most could not afford to purchase the stamps.

- 1943 When America entered World War II unemployment was reduced and food surplus was absorbed by allied and domestic needs. Subsequently, food stamps and most other food assistance were discontinued. However, USDA continued food assistance to schools as a wartime exigency due to political support from farm interests, local school districts, State school administrators, and health officials.
- **1946** Congress authorized the National School Lunch Program.
- **1949** The Agricultural Act of 1949 authorized commodities acquired under Section 32 to be distributed to nonprofit charitable institutions which serve meals to needy persons on a regular basis. These included homes for the elderly, hospitals, soup kitchens, food banks, orphanages, and summer camps.
- 1951 After the war, the nation once again sank into a depressed economic situation. Some areas reestablished systems for distributing surplus foods and an interest in food stamps was also revived.
- 1955 The Special Milk Program was created and funded by the Commodity Credit Corporation and later authorized as a direct appropriations program under the Agriculture Act of 1961. It was initially established to encourage children in schools, summer camps, and other institutions to drink more milk due to an over-abundance of milk which increased Federal surplus holdings to unmanageable levels.
- **1959** Public Law 86-341 authorized a discretionary two-year food stamp program to promote the purchase of surplus commodities. However, the Eisenhower administration chose not to implement this program.
- 1961 President Kennedy initiated food stamp pilot projects funded through Section 32 funds. Again, participants purchased coupons of a higher value than their cash contribution and used the coupons to purchase food at retail stores. Purchases were no longer limited to surplus commodities.
- **1963** In January 1963 President Kennedy asked for legislation authorizing a permanent Food Stamp Program (FSP). The request was subsequently renewed in January 1964 by President Johnson.
- **1964** The Food Stamp Act of 1964 (Public Law 88-525, enacted August 31, 1964) established a permanent FSP. It was implemented nationwide by 1974. The purchase requirement was not eliminated until 1977.

- 1965 The Nutrition Program for the Elderly (NPE), was authorized by the Older Americans Act of 1965. The intent of NPE was to supplement Department of Health, Education and Welfare, DHEW, (renamed the Department of Health and Human Services) programs for the elderly with commodities for meals. Food is served in senior citizen centers and similar settings where social and rehabilitative services are also available. Meals may also be delivered to the homebound.
- 1966 Congress passed the Child Nutrition Act shifting food assistance resources to children in poor areas where nutritional needs seemed the greatest. This act was part of a general movement in the 1960s away from agriculturally determined food assistance programs and toward programs specifically directed to providing food services for children in schools, child care institutions, and summer recreation programs. The Act included authorizing on a pilot basis the School Breakfast Program, which was later permanently authorized in 1975.
- 1967 The discovery of hunger in America became a national political issue. Until that time, most Americans assumed that hunger and malnutrition were the afflictions of Asia and other faraway places -- how could anyone really be hungry in the world's richest nation? Nevertheless, hunger was identified as a contemporary social problem when members of the Physicians Task Force on Hunger in America fanned out across the country, visiting Appalachia and the Mississippi Delta among other places, and found many Americans, many of them children, literally starving to death. Various studies concluded that 10 to 15 million Americans suffered from serious problems of hunger and malnutrition. (Nick Kotz, 1979)
- 1968 The Child Care Food Program was initiated on a pilot basis to serve areas with
 poor economic conditions or with a high concentration of working mothers. Cash and
 commodity assistance was provided to child care centers and to other non-residential
 child care facilities.
- 1967-1968 During this period, the following occurred:
 - A Poor Peoples' Campaign culminated in a march on Washington, DC. The march was influential in publicizing the problem of malnutrition among low income families.
 - A powerful CBS documentary, "Hunger in America," added to the demand for reform.
 - A series of meetings between USDA and DHEW resulted in the recognition that pregnant and breastfeeding women and infants from low-income families and vulnerable to malnutrition were a high-risk group.
 - A Citizen's Board of Inquiry into hunger and malnutrition in the United States recommended supplementing the diets of these infants and pregnant and breastfeeding women.

Explanation: The early stage of a child's development is the most critical. Malnutrition during the fetal stage or first few years of life can cause serious physical or mental impairment. Weight gain during pregnancy as well as a mother's weight before pregnancy are very strongly associated with the birthweight of the baby and thus his life chances. Inadequate and improper nutritional intake by women during pregnancy is the major factor contributing to low birthweight (less than five pounds) of an infant. Many infant mortalities are due to low birthweight. In addition, as a group, low birthweight babies have more potential illnesses, child growth failure, neurological and physical handicaps, and mental retardation. Concerning arrested brain development, the brain, as well as other organs, goes through two stages of growth. In the first stage of the brain, growth is by increase in the number of cells; in the second stage, growth is by increase in the size of existing cells. Undernutrition during the first stage appears to result in a permanent deficit in cell number. Since the brain completes its growth first, it is at severest risk from fetal and infant malnutrition. Severely malnourished infants may have as many as 40 percent fewer brain cells than their well-nourished counterparts. Nutritional deprivation can, therefore, result in irreparable brain damage and permanently impaired intelligence.

- 1969 In response, Secretary of Agriculture Orville Freeman established the Supplemental Food Program (later renamed the Commodity Supplemental Food Program) through administrative active. There was no legislative mandate to do so. The program donated commodities to feed low-income pregnant women, infants and young children to age 6 at nutritional risk. No administrative funds were provided. It initially was intended to have a strong relation to health programs but in order to get it implemented the health aspect was essentially dropped.
- 1969 The Summer Food Service Program was initiated on a pilot basis. It was designed to provide food service to children in needy areas during summer vacation.
- 1972 It was recognized that the available food assistance programs were not meeting the special needs of pregnant women and infants.

THE GENESIS OF WIC

Excerpt from article by Rodney E. Leonard entitled Carl Perkins: WIC's Champion:

• 1972 - A staff member of the Senate Agriculture Committee, James Thornton, became aware of two local food and medial assistance projects at St. Jude's Hospital in Memphis, Tennessee and at Johns Hopkins University in Baltimore, Maryland. Both projects provided specific nutritional aid and medical care to infants and pregnant women in poor areas. The projects produced significant reductions in anemia among the participants.

- Working with Rodney Leonard, President of the Community Nutrition Institute, Thornton drafted legislation creating a \$20-million Federal program in the mold of the Johns Hopkins-St. Jude projects. Senator Hubert Humphrey of Minnesota agreed to propose the program for women, infants and children (WIC) as an amendment to a bill authorizing several changes in the school lunch and breakfast program. He sought approval of his amendment in the Senate Agriculture Committee, but a majority of the committee was cautious, even unenthusiastic, about the proposal. Senator Humphrey wanted to create a two-year demonstration program to fund up to 40 neighborhood health clinics and well-baby units to prescribe food for mothers and infants who were hungry and malnourished. Testimony from experts around the country and even a world renown pediatrician from nearby Johns Hopkins did not persuade the Committee to approve Senator Humphrey's amendment.
- Senator Humphrey told Committee Chairman Herman Talmadge that he would offer the amendment on the Senate floor, and the Georgia Senator said he would not oppose the maneuver. Senator Humphrey buttonholed every Senator the day of the vote, and for those who could not be reached by words, a photo display was overwhelming. St. Jude's Hospital had sent the Senator a sequence of photos of an infant girl who was severely malnourished and near starvation when brought to the hospital. The child's brain case had grown closed, but had been forced open again after the child had been fed an adequate diet. The WIC Program would prevent this kind of tragedy Senator Humphrey said, and prevent other incidents where mental retardation might occur.
- The overwhelming Senate vote for the Humphrey amendment led the Senator to call Representative Carl Perkins, Chair, House Education and Labor Committee, because the future for WIC seemed precarious, at best. Without a masterful legislative strategy in the House of Representatives, the WIC Program would be a creative impulse of the Minnesota Senator, and nothing more. Carl Perkins was the only person in the country who had the power to make WIC a nutrition program.
- These two men had known each other for many years, from the days when Humphrey was an activist mayor of Minneapolis and Perkins as a young Congressman representing the communities of eastern Kentucky, an area of unyielding poverty. Both were committed to the New Deal and its concepts of social justice, fairness and the idea that government could help make life better for people. As both men rose in power and prominence, they found many opportunities to work together, but few could match the importance of the issue on which they met one September day in 1972.
- The two men discussed the concept not as scientists or social researchers, but as politicians with strong memories of their own poverty as young men and the human suffering they had witnessed. That common experience was all the argument needed to convince each other that a problem existed; instead, they examined the proposal as an action to respond to the problem. The concept provided an immediate, quick and

sympathetic response; privately funded projects of a similar character were successful, and prominent medical authorities would so testify; the proposal called for a pilot study, and critics could examine the results before being asked to authorize a new program. However, as advocates would recognize, the proposal established framework for a new program; and, the program clearly linked nutrition to health for the first time as public policy.

- Congressman Perkins readily agreed to commit his own formidable powers in a personal effort to obtain House approval for the new program. He had the position and the power and the inclination for the task, which could founder for one of any number of causes. He had to keep the Democrats together in support of the proposal, and he had to convince the Republicans, particularly Representative Albert Quie, ranking minority member of the Committee, to support the proposal. This was an especially sensitive matter since Quie was the leading Minnesota Republican in the Congress and would not easily give Senator Humphrey the political advantage of claiming credit for WIC in their home State. Further, the Nixon administration was opposed to the amendment.
- The proposal was a complex legislative situation. First, the proposal was not germane. Since the House had held no hearings on the proposal when it first passed the bill-school lunch bill-the Humphrey amendment technically did not relate to school lunch. When the legislation was sent to conference to resolve differences between the House and Senate versions, the House conferees either had to convince the Senate to withdraw its amendment or agree to seek unanimous consent of the House to accept the Senate proposal. The latter task required Perkins to persuade Quie to support the WIC proposal in the conference committee; and, then Quie had to be as strongly committed as Perkins to persuade his fellow Republicans not to challenge the proposal when it came to the House floor for unanimous consent.
- A second legislative hurdle was the mechanism to fund the WIC demonstrations. Traditionally only the appropriation committees say how much money is actually spent on any program, regardless of how much the legislative committee authorized to be spent. A quirk in the laws related to the Department of Agriculture, however, allowed Humphrey and Perkins to appropriate funds for the program.
- The quirk was Section 32, a provision in the Agriculture Act of 1935, that appropriates as new obligational authority to the Secretary of Agriculture an amount of money each year equal to thirty percent of the customs receipts of the previous year. The Secretary is directed to use the funds for purposes that enhance farm income, including spending to increase food consumption. The beauty of new obligational authority in this form is that it is an automatic appropriation without conditions or restrictions. And, the Humphrey/Perkins proposal could fund WIC by directing (i.e., by placing a condition on) the Secretary to use \$20 million from Section 32 each year for two years to operate the demonstration projects. While the strategy provided instant funding to the program, it is a procedure that appropriation

committees deeply resent as an incursion on their turf. Perkins had to mollify Representative Jamie Whitten, a Mississippi Democrat who guarded Section 32 jealously as Chairman of the Agriculture Appropriation Subcommittee.

- On September 11, Chairman Perkins submitted a conference report to the House, including information that the conference committee was in technical disagreement over the WIC amendment. However, the Chairman reported, "The managers on the part of the House will offer a motion that the House recede from its disagreement to the amendment of the Senate...and concur therein."
- Two days later Chairman Perkins brought the conference report to a vote on the House floor. The Congressional Record for September 13, 1972, reports that he told the House "the program will provide cash grants to State health departments to financially assist local health clinics serving low-income residents to combat malnutrition among infants." He pointed out the actions Congress had taken in recent years to improve nutritional status for many groups. "But we have continued to ignore, regrettably, one group which cannot speak for itself and which is the most vulnerable to adverse effects of malnutrition—our nation's infants."
- Representative Quie endorsed the proposal strongly, noting "The amendment makes clear that these pilot efforts are to lead to an expansion of the program later if the medical evidence and experience of this program proves that such assistance does in fact help avert physical and mental damage caused to children due to malnutrition.
- Following the debate on the conference report, approved by the House 342 to 34, Chairman Perkins rose to move that "the House recede from its disagreement to the Senate amendment...and concur therein." Any member of the House floor at that moment could have raised his voice in opposition. None was heard. The journal for the House simply reads: "The motion was agreed to."
- 1972 P.L. 92-433, enacted September 26, 1972, established the Supplemental Food Program for Women, Infants and Children (WIC) as a two-year pilot program-a testament to the almost legendary skills of Chairman Perkins as a legislative strategist in the House, and the vision and courage of both Senator Humphrey and Representative Perkins, with no small assist from Representative Quie.

Conclusion of excerpt.

- The program was funded with Section 32 funds at \$20 million each for FYs 1973 and 1974. Up to 10 percent of the total budget for each FY was allowed for administrative costs.
- WIC was to serve pregnant and postpartum women, infants, and children to age four (rather than to age 6 as under the CSFP). In addition to meeting the income guidelines, it was required that applicants display physiological or epidemiological

signs that their health was at risk due to poor nutrition. Eligibility was to be determined by a competent professional authorized. Responsibility for administration at the Federal level was placed with the Department of Agriculture, Food and Nutrition Service (FNS). Federal funds were to be distributed to State health departments for allocation to local agencies operating WIC Programs. The law also required that the benefits of the program be evaluated.

- USDA set up a task force within FNS to design the operating guidelines for the project.
- 1973 While the task force was developing the initial regulations, a class action suit was filed against USDA by the Food Research and Action Center to force expedited establishment of the regulations and to ensure that all the money appropriated was spent. On August 3, 1973, the court ruled in favor of the plaintiffs.
- The task force published initial regulations for the WIC program on July 11, 1973.
- **1973** P.L. 93-150, enacted November 7, 1973 authorized recognized Indian tribes, bands or groups to act as their own WIC State agencies.
- The first WIC site was officially opened in Pineville, Kentucky on January 15, 1974. By the end of 1974, WIC operated in all States except Nebraska, North Dakota, Utah, Virginia, Wyoming and the District of Columbia.
- 1975 P.L. 94-105, enacted October 7, 1975, established WIC as a permanent national health and nutrition program. It increased the administrative spending cap from 10 to 20 percent and allowed nutrition education costs as administrative expenses; expanded eligibility for the program, extending it to breastfeeding mothers for a period of one year postpartum, to postpartum non-breastfeeding women up to 6 months, and to children up to the age of five; established an Advisory Committee to study methods available to evaluate the health benefits of WIC; and also established a National Advisory Council on Maternal, Infant, and Fetal Nutrition to study the program and submit to the President and Congress a biennial report recommending administrative and legislative changes it deemed necessary.
- 1976 WIC's first evaluation was released; it found WIC improved infant health and reduced anemia among both mothers and infants.
- 1978 P.L. 95-627, enacted on November 19, 1978, established income eligibility guidelines, State Plan requirements, funding formulas, requirements for approval of State and local agency applicants, defined nutritional risk, required that not less than one-sixth of administrative funds be used for nutrition education, and directed the Secretary of Agriculture to regulate the types of food provided and their maximum fat, sugar, and salt content.

- 1980 Wyoming is the last State to enter the program.
- **1981** The District of Columbia began administering the program.
- 1983 Guam began serving participants.
- 1987 P.L. 100- 23, the Commodity Distribution Reform Act and WIC Amendments of 1987, authorized States to use part of the savings from cost containment measures for the increased administrative costs of expanded participation. The law required that State WIC planning include coordination with Medicaid Programs. It directed the Secretary of Agriculture to conduct a national study of the impact of participation in WIC on the costs of Medicaid for families with newborns.
- 1988 P.L. 100-435, the Hunger Prevention Act enacted September 19, 1988, provided for grants for up to 10 States for 3 years to conduct Farmers' Market Coupon Demonstration Projects for WIC participants. It also included a provision to improve access to WIC for homeless persons and migrant populations.
- **1988** P.L. 100-690, the Anti-Drug Abuse Act, enacted November 18, 1988, delineated WIC's role in screening participants and making referrals to drug abuse counseling, treatment, and education programs.
- 1988 Congress authorized the WIC Farmers' Market Nutrition Program demonstration project to operate in 10 States with an initial funding level of \$2 million. Its purpose was to provide coupons (typically \$10-\$20 per participant, per year), separate from WIC vouchers, to WIC participants to purchase produce from farmers markets.
- **1989** P.L. 100-460, the Agriculture Appropriations Act for Fiscal Year 1989, required every State agency to explore the feasibility of a cost containment system, especially rebates, and to implement such a system where feasible.
- 1989 P.L. 101-147, enacted November 10, 1989, required State agencies to use a competitive bidding system to secure rebates on the purchase of infant formula. It makes members of families that receive food stamps, Temporary Assistance for Needy Families (formerly Aid for Families with Dependent Children) or Medicaid automatically income-eligible for WIC. The law also increased emphasis on breastfeeding promotion: it established a national definition for the term "breastfeeding;" required State standards for breastfeeding promotion and support, and earmarked \$8 million annually in administrative funds for that purpose; authorized the use of administrative funds to purchase breastfeeding aids; required States to make a yearly evaluation of their breastfeeding promotion and support activities; required State agencies to provide nutrition education and breastfeeding materials in languages other than English as appropriate; required State agencies to include in their State plan a plan to provide nutrition education and promote breastfeeding; required State

agencies to coordinate operations with local agency programs for breastfeeding promotion, designate a breastfeeding coordinator, and provide training on breastfeeding promotion and support to local agency staff; and required the Secretary of Agriculture to appoint an expert in breastfeeding promotion to the National Advisory Council on Maternal, Infant and Fetal Nutrition. Other provisions simplified and made more equitable the allocation of WIC administrative funding.

- **1991** P.L. 102-342, required the Secretary of Agriculture to establish a national breastfeeding promotion program, and authorized the Department to solicit and accept donations from outside sources for this purpose. It also included "homelessness" and "migrancy" as nutritional risk factors in determining eligibility for WIC benefits.
- **1992** P.L. 102-314, the WIC Farmers Market Nutrition Act, enacted July 2, 1992, established the Farmers Market Nutrition Program as a separate program.
- 1992- P.L. 102-512, the WIC Infant Formula Procurement Act of 1992, provided for various actions and incentives to enhance competition and reduce WIC food package costs. The law permits the Secretary to solicit bids on behalf of States individually or as a group.
- 1994 P.L. 103-448, the Healthy Meals for Healthy Americans Act, enacted November 2, 1994, required WIC State agencies to spend \$21 dollars per each pregnant and breastfeeding women in support of breastfeeding promotion and support. It also required each WIC State agency to collect data on the incidence and duration of breastfeeding among participants. The data is required to be reported to Congress every two years.
- 1996 American Samoa began administering the program.
- 1998 P.L. 105-336, the Child Nutrition Act of 1998, enacted October 31, 1998, reauthorized WIC through FY 2003. The law requires applicants and participants to provide documentation of income or documentation of receipt of TANF, Medicaid or Food Stamp benefits at certification and subsequent certification appointments. State agencies may waive the requirement when documentation does not exist or when the requirement presents a barrier to participation such as in the case of homeless women and children. The law also requires all infants and children to be present at certification and subsequent certification appointments. The requirement may be waived for infants and children who were present at the initial certification and are receiving ongoing health care from a provider other than the WIC agency if the requirement would present a barrier to participation. It can also be waived for children of working parents if the child was present at the initial certification appointment or subsequent certification appointment within the last six months and the requirement presents a barrier to participation. Waivers may not be granted for children in two-parent households where only one parent works. The requirement may be waived for children protected by the Americans with Disabilities Act. The law

also gives State agencies the authority to purchase breast pumps with WIC food funds without first having to spend a minimum level of Nutrition Services and Administration funds for pumps.

EPILOGUE - 1999

- Today, WIC is funded at \$3.924 billion and serves 7.4 million participants through 88 WIC State agencies, including 50 State health departments and 33 Indian Tribal Organizations, through 2,000 local agencies in 10,000 clinic sites in: 50 States, American Samoa, District of Columbia, Guam, Puerto Rico and the Virgin Islands. WIC is recognized as a leading national health and nutrition program.
- The Farmers Market Nutrition Program operates in 35 States, the District of Columbia, and in two Indian Tribal organizations.